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	Application Number	10/069,209	
TRANSMITTAL	Filing Date	June 3, 2002	
FORM	First Named Inventor	Malcolm Trayt	on Austen
	Art Unit	1753	
(to be used for all correspondence after initial fi	Examiner Name	Kaj K. Olsen	
Total Number of Pages in This Submission	Attorney Docket Number	5133-00004	
ENCLOSURES (Check all that apply)  After Allowance Communication to TC			
Fee Transmittal Form	Drawing(s)		
Fee Attached	Licensing-related Papers	└─┘ of	opeal Communication to Board Appeals and Interferences
Amendment/Reply	Petition Petition to Convert to a		ppeal Communication to TC ppeal Notice, Brief, Reply Brief)
After Final	Provisional Application	, <del></del>	oprietary Information
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence A		atus Letter
Extension of Time Request	Terminal Disclaimer		her Enclosure(s) (please Identify low):
Express Abandonment Request	Request for Refund	Retur	n Receipt Postcard
Information Disclosure Statement	CD, Number of CD(s)		
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Reply to Missing Parts/			
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under 37 CFR 1.52 or 1.53			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Andrus, Sceales, Starke & Sawall, LLP			
Signature Joseph D. Val			
Printed name  Joseph D. Kuborn			
Date February 15, 2005	5 F	<sup>leg. No.</sup> 40,689	
CERTIFICATE OF TRANSMISSION/MAILING			
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Signature Alsohia T. Prange			
Typed or printed name Aleshia T. F		Da	te February 15, 2005

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PTO/SB/17 (12-04)

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Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Effective on 12/08/2004. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 10/069,209 TRANSMITTA Filing Date June 3. 2002 For FY 2005 Malcolm Trayton Austen First Named Inventor Kaj K. Olsen **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1753 TOTAL AMOUNT OF PAYMENT (\$) \$0.00 5133-00004 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Name: Andrus, Sceales, Starke & Sawall, LLP ✓ Deposit Account Deposit Account Number: 01.2000 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **SEARCH FEES EXAMINATION FEES FILING FEES Small Entity Small Entity Small Entity Application Type** Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 200 150 500 250 100 130 Design 200 100 100 50 65 Plant 200 100 300 160 80 150 Reissue 300 150 500 250 600 300 Provisional 200 0 100 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) **Fee Description** Fee (\$) 50 Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 180 Multiple dependent claims Multiple Dependent Claims **Total Claims Extra Claims** Fee Paid (\$) Fee (\$) \$0.00 Fee Paid (\$) 30 Fee (\$) HP = highest number of total claims paid for, if greater than 20 **Extra Claims** Fee (\$) Fee Paid (\$) Indep. Claims HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) **Total Sheets Extra Sheets** (round up to a whole number) x \$0.00 Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other: SUBMITTED BY Registration No. Telephone 414-271-7590 Signature 40.689

Date February 15, 2005 Name (Print/Type) Jøseph D. Kuborn

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